

# Lessons From the Practice

---

## The Final Act

CHRIS DERK, MD, *MacDill Air Force Base, Florida*

---

It's 10:30 again. I look at the clock. I can't remember how the hours went by. I look in the eyes of the two women in front of me. They are the same eyes I saw not so long ago. The eyes of despair, pain, and fear, but yet with a small glimpse of hope.

When Mr. Walter, an 88-year-old gentleman with multi-infarct dementia, came to the emergency room, he didn't have long to live. He was clutching for breath and asking for help. The new murmur in Mr. Walter's chest was confirmed by echocardiography, and his only hope was emergent surgery. Consultants were scrambling to get their ideas on paper, and Mr. Walter's physician asked me to ascertain the family's wishes. That is when I first heard the question, "Is he DNR?" As one after the other medical staff learned about Mr. Walter, the same question was thrown at me. They were like actors who hadn't been told the Final Act. They had no scenario to go by. The question became more and more intense and more and more frequent. The burden I felt was very heavy, but it was my job. I was the senior resident. I was the one responsible to produce an answer for them. I had to get them the Final Act they were looking for.

I moved toward the two women in the waiting room and pulled a chair next to them. The three of us formed a circle as if we were going to share a secret. I looked in their eyes and tried to be as objective as possible, and still empathize with their feelings. They had just buried their mother, and now they only had each other to share their grief. But here I was, a stranger to them, telling them that it was time for their father to die.

"He needs a valve replacement. Without it, he will die."

The two sisters looked at each other.

"What do you think?" said one to the other.

"Would he have wanted it, or not?"

"Will he make it out of surgery?"

"What do you think, Doctor?"

They hadn't had time to mourn their mother and had no time to realize what was happening to their father, yet I was asking them to give me a rational answer to my question in the next few minutes, or hours. They were to give me a Final Act to a "play" called life that took so many years of living to complete.

After talking to all of the consultants, and after getting all of the statistics and possible scenarios, the two sisters approached me with tears in their eyes. They were giving me the Final Act.

"Let him go, but don't let him suffer, make him comfortable."

Is it ethical to put the family under such pressure in such a short time? Is it ethical that Mr. Walter didn't have a living will? Shouldn't Mr. Walter have written the Final Act? What is the role of his doctor in all of this; the role of his daughters? These are all questions that have been answered multiple times and in multiple ways, yet they recur and they still don't have a definitive answer.

There is a need to educate patients about what a living will means, and try to show them the responsibility and uncertainty that they leave behind for their loved ones to bear, when they don't have one. Death is a taboo subject but it needs to be publicized more, not only to doctors but also to patients. Death needs to become a more dignified end.